HCP/HCO Methodological Note

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Bristol Myers Squibb: Methodological note for HCP/HCO disclosure 2025

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Introduction

This methodological note explains Bristol Myers Squibb's (BMS) approach to preparing its annual HCP/HCO transfers of value (ToV) disclosure for the 2025 reporting period. EFPIA requires member companies to publish a note summarising the methodologies used (e.g., recognition rules, treatment of multi-year agreements, VAT and currency aspects). BMS publishes this note alongside its disclosure to improve clarity, consistency and traceability across markets.

1. Definitions

1.1 Recipients: BMS aligns to EFPIA HCP/HCO scope and applies any additional country definitions where required by national codes.

HCP: Any natural person who, in the course of professional activities, may prescribe, purchase, supply, recommend or administer a prescription-only medicine and whose primary practice or principal professional address is in Europe.

HCO: Any legal person/entity such as a hospital, clinic, foundation, university or other teaching institution or learned society (except POs within Article 21) whose business address, place of incorporation or primary place of operation is in Europe, or through which one or more HCPs provide services.

1.2 Kind of ToVs

• HCO / third party: Donations and Grants; Contribution to costs related to Events (registration fees; sponsorship agreements with HCOs/third parties to manage Events; travel & accommodation to the extent permitted); Fees for Service & Consultancy (fees itemised separately from related expenses).

• HCP: Contribution to costs related to Events (registration; travel & accommodation); Fees for Service & Consultancy (fees itemised separately from related expenses).

• R&D: ToVs related to non-clinical studies, clinical trials, and prospective and retrospective non-interventional studies (NIS).

2. Disclosure's Scope

2.1 Products concerned

Disclosures relate to ToVs made in connection with prescription-only medicines for human use.

2.2 Company concerned

Bristol Myers Squibb and in-scope affiliates. Where BMS assumes reporting for acquired entities, legacy consent agreements are respected; if unclear, related ToVs are disclosed in aggregate.

2.3 Excluded ToVs

Items of medical utility, meals, medical samples, and ordinary course purchases/sales of medicinal products are out of scope for disclosure.

2.4 ToVs date

The ToV disclosure report includes financial transactions which have a payment date within the reporting period being disclosed.

2.5 Direct ToVs

ToVs made directly by BMS for the benefit of a Recipient.

2.6 Indirect ToVs

ToVs made on behalf of BMS, or via a third party, where the Recipient is known/identifiable.

2.7 Non-monetary ToVs

Benefits in kind are included (e.g., in-kind sponsorships) and categorised according to EFPIA categories.

2.8 ToVs in case of partial attendances or cancellation and refund

Only ToVs confirmed as provided to the HCP/HCO are disclosed.

2.9 Cross-border activities

Where a ToV is made outside the Recipient's country, it is reported in the country of the Recipient's principal practice address.

2.10 R&D

R&D ToVs are disclosed in aggregate with the exception of confirmed retrospective non-interventional studies, where HCPs are disclosed on an individual basis under fee for service where consent allows.

2.11 Voluntary disclosure

In certain markets BMS publishes additional information (e.g., contracted services to patients, journalists or the public) on an aggregate basis in line with local requirements.

3. Specific considerations

3.1 Country unique identifier

Recipients are identified by name and country of principal practice. Where a national unique identifier is mandated locally, it is used in accordance with local code and privacy requirements.

3.2 Self-incorporated HCP

Payments to a self-incorporated HCP (legal entity) are generally disclosed per local code definitions.

3.3 Multi-year agreements

ToVs related to multi-year agreements follow the same rules as other ToVs (see 'ToVs date ').

3.4 Country specificities

BMS follows national code guidance and publication requirements; any deviations from this note are documented in local notes where required.

3.5 Quality Checks

All data were correct at time of publication; internal governance, review and approvals apply prior to publication (per BMS SOPs).

4. Data protection legal basis

4.1 Consent collection

Where required by national code or law, BMS requests consent from Recipients for named disclosure. If consent is not granted or withdrawn, ToVs are included in aggregate (per category). For acquired entities, BMS honours the original consent terms; where unclear, aggregate disclosure is used.

4.2 Legitimate interests

In some markets, BMS applies legitimate interests as the legal basis for processing ToV data for disclosure. HCPs are informed and may exercise their right to object in line with GDPR and local law.

5. Form of disclosure

5.1 Date of publication
Publication aligns to national code timelines (generally within six months after year-end).

5.2 Disclosure platform
Where a central national platform exists, BMS discloses there; otherwise, disclosures are published on BMS's country website in a dedicated transparency section, with this methodological note attached.

5.3 Disclosure language
Language is determined by the national code; English versions may also be provided.

6. Disclosure financial data

6.1 Currency
Reports are submitted in the local currency of each country. If conversion is required: for financial payments, the average daily FX rate on the payment date is used; for ToVs related to interactions, the average daily FX rate on the interaction date (event start date for indirect ToVs) is used.

6.2 VAT included or excluded
Where possible, ToVs are disclosed exclusive of VAT. If VAT cannot be separated, VAT-inclusive amounts may be disclosed.

6.3 Calculation rules
Fees are disclosed separately from related expenses as required.

7. Additional Information

Scientific Publications: When BMS funds medical writing/editorial services for external authors, this is treated as an in-kind ToV. If tied to R&D, the value is disclosed within R&D; otherwise, disclosed individually under Fees for Service & Consultancy, as applicable.